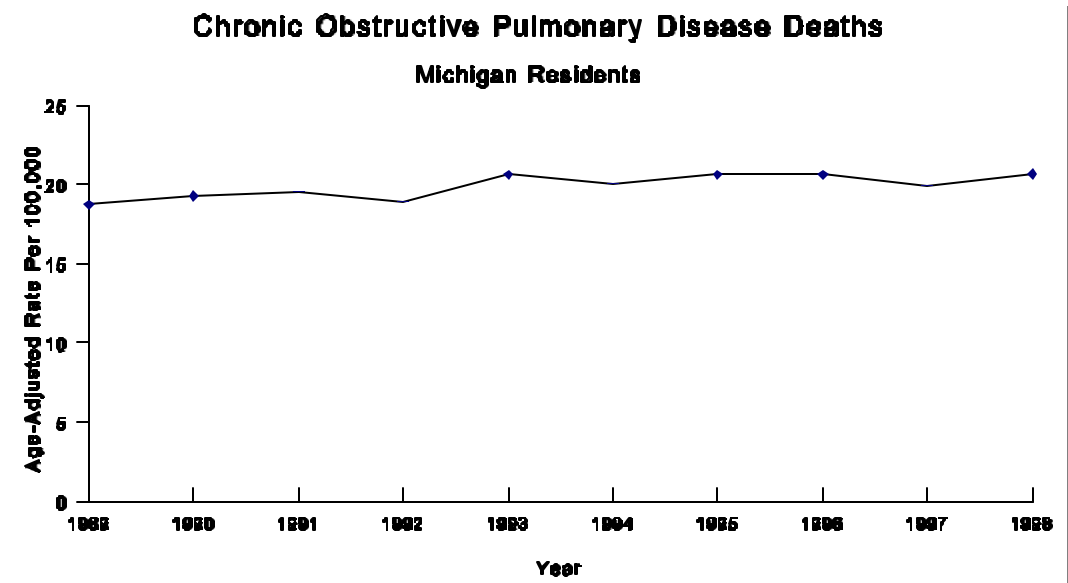


## Vital Statistics Indicators

### *Chronic Obstructive Pulmonary Disease Deaths*



Source: Division for Vital Records and Health Statistics, MDCH

#### ***How are we doing?***

Chronic obstructive pulmonary disease (COPD) and allied conditions are the fourth leading cause of all deaths in Michigan and the seventh leading cause of Years of Potential Life Lost (YPLL) for people below the age of 75.

COPD is comprised of many conditions such as emphysema, bronchitis, and asthma. In emphysema, the small air sacs in the lung called alveoli are destroyed. With bronchitis, the lining of the airways that lead to the lungs becomes irritated, inflamed, and swollen. Asthma causes the airways of the lungs to tighten, swell, and fill with mucus. COPD deaths can be reduced by changes in lifestyle, such as quitting smoking.

In 1998, there were 3,804 deaths due to COPD and allied conditions in Michigan. The age-adjusted rate for COPD related deaths was 20.7 per 100,000 population. The COPD death rate has remained fairly consistent during the past 10 years.

#### ***How does Michigan compare with the U.S.?***

Michigan's 1997 age-adjusted death rate of 19.9 was lower than the U.S. rate of 21.1. COPD and allied conditions were the fourth leading cause of all deaths in the U.S. and the eighth leading cause of YPLL in 1997.

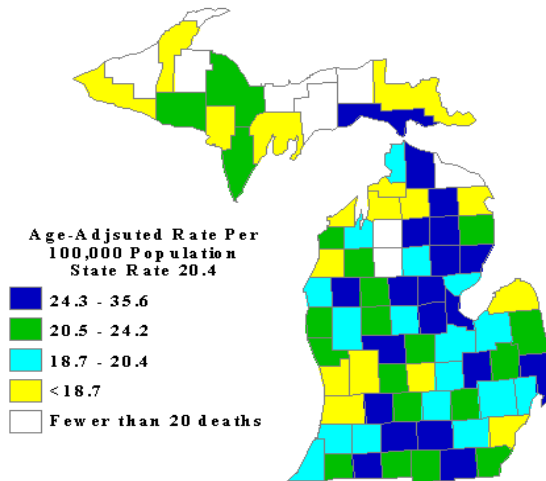
### ***How are different populations affected?***

In Michigan, 86 percent of COPD deaths occurred to individuals aged 65 or older in 1998.

Men are also more likely to die of COPD and allied conditions. In 1998, the age-adjusted rate was 25.5 for men and 17.6 for women. The difference between men and women is becoming less pronounced. This may be related to changing patterns of smoking.

The age-adjusted rate of death from COPD is generally higher for whites than for African-Americans. The rate for whites in Michigan was 21.0 while the African-American rate was 17.7.

**Chronic Obstructive Pulmonary Disease Death Rates  
1996-1998 County Averages**



### ***What other information is important to know?***

The first symptom of emphysema is usually shortness of breath. An individual is considered to have chronic bronchitis if they have a cough that produces mucus most days for at least 6 months in one year, or three months in each of two consecutive years. An asthma attack may be triggered by pollen, mold, dust, weather changes, strong odors, cigarette smoke, certain foods, strong emotions, a cold or the flu, or being near furry or feathered animals. Smoking is responsible for more than 80 percent of COPD.

### ***What is the Department of Community Health doing to affect this indicator?***

As smoking is a major cause of COPD, the department is actively working to decrease the use of tobacco. Programs to reduce tobacco use include promoting strong public and voluntary policies to increase awareness of the danger of tobacco use and secondhand smoke; to prevent the sale and promotion of tobacco to youth; and to provide a statewide media campaign with prevention, cessation and secondhand smoke messages. Initiatives include Medicaid coverage for smoking cessation products, developing a pilot telephone-based cessation support program for Medicaid patients, and offering self-help cessation kits and tobacco related information. The department provides training for health professionals and other providers to recognize and treat nicotine addiction. Tobacco use prevention is offered through Teen Health Centers/Alternative Models.